



Patent
Attorney's Docket No. 010315-089

RCE #
3761

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

18
DN
3/1/4

In re Patent Application of)

Petter BRAGD et al.)

Application No.: 09/651,127)

Filed: August 30, 2000)

For: ABSORBENT STRUCTURE IN AN)
ABSORBENT ARTICLE AND A)
METHOD OF PRODUCING IT)

Group Art Unit: 3761

Examiner: J.A. Webb

Confirmation No.: 1058

RECEIVED

FEB 27 2004

REQUEST FOR CONTINUED EXAMINATION TECHNOLOGY CENTER R3700
TRANSMITTAL LETTER

MAIL STOP RCE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Customer No. **21839**

Sir:

Applicant(s) requests continued examination under 37 C.F.R. § 1.114 and enclose the
[] \$385.00 (2801) [X] \$770.00 (1801) fee due under 37 C.F.R. § 1.17(e).

1. [] A. Applicant(s) requests that any previously unentered after final amendments not be entered. Continued examination is requested based on the enclosed documents identified in item 2 below.

[] B. Applicant(s) previously submitted the following documents for which continued examination is requested:
[] Consider the amendment(s)/reply under 37 C.F.R. § 1.116 previously filed on _
[] Consider the arguments in the Appeal Brief or Reply Brief previously filed on _
[] Other: _____
2. The following documents are enclosed with this submission:
[X] Amendment/Reply.
[] Affidavit(s)/Declaration(s).
[X] Information Disclosure Statement (IDS).
[] Petition for Extension of Time.
[X] Other: Submission of Priority Document, Annotated Drawings and Replacement Drawings.
3. [] Small entity status is hereby claimed.
[X] No additional claim fee is required.

(10/03)

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Request for Continued Examination Transmittal Letter

Application No. 09/651,127Attorney's Docket No. 010315-089

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- ☐ The fee is calculated below on the basis of the highest number of claims already paid for in this application prior to this submission:

C L A I M S					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS THUS PAID FOR	EXTRA CLAIMS	RATE	FEE
Basic Fee					\$770.00 (1001)
Total Claims	12	MINUS 20 =	0	× \$18.00 (1202) =	
Independent Claims	2	MINUS 3 =	0	× \$86.00 (1201) =	
If multiple dependent claims are presented, add \$290.00 (1203)					
Total Fee					\$770.00
If small entity status is claimed, subtract 50% of Total Fee					
TOTAL FEE DUE					\$770.00

4. ☒ A check in the amount of \$ 770.00 is enclosed for the fee due.
5. ☐ Charge \$ _____ to Deposit Account No. 02-4800 for the fee due.
6. ☐ Applicant(s) requests suspension of action by the Office until at least __, which does not exceed three months from the filing of this RCE, in accordance with 37 C.F.R. § 1.103(c). The required fee under 37 C.F.R. § 1.17(i) is enclosed.

The Director is hereby authorized to charge any appropriate fees under 37 C.F.R. §§ 1.16, 1.17 and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 02-4800. This paper is submitted in duplicate.

Respectfully submitted,

BURNS, DOANE, SWECKER & MATHIS, L.L.P.

Date: February 24, 2004

By: William C Rowland
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